



S/N 10/661,918

PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: RAGER,
CHRISTOPHER
Serial No.: 10/661,918
Filed: SEPTEMBER 12, 2003
Title: PENDULUM BOW SIGHT HAVING VERTICAL PINS

Examiner: COURSON, TANIA C.
Group Art Unit: 2859
Docket No.: 13435.6USU1

*FEB
ONLY*

CERTIFICATE UNDER 37 CFR 1.8:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, with sufficient postage, in an envelope addressed to: Commissioner for Patents, Mail Stop Amendment, P.O. Box 1450, Alexandria, VA 22313-1450 on December 9, 2004.

By: *[Signature]*
Name: Sherry LunsdenPETITION FOR EXTENSION OF TIME

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In accordance with the provisions of 37 C.F.R. §1.136(a), it is respectfully requested that a one-month extension of time be granted in which to respond to the outstanding Office Action mailed September 3, 2004, said period of response being extended from December 3, 2004 to January 3, 2005.

Please charge Deposit Account No. 13-2725 in the amount of \$60.00 to cover the required extension fee for a small entity.

Respectfully submitted,

MERCHANT & GOULD P.C.
P.O. Box 2903
Minneapolis, Minnesota 55402-0903
(612) 332-5300

David G. Schmaltz
David G. Schmaltz
Reg. No. 39,828
DGS/JEL:sll

01/05/2005 AJOHNS01 00000006 132725 10661918

01 FC:2251 60.00 DA
Date: December 9, 2004

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

10/661,918
13435,605

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	15	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	15 minus 20 =	0
INDEPENDENT CLAIMS	2 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	** 20	= 0
Independent	4	Minus	*** 3	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	FEE	RATE	FEE
BASIC FEE	375.00	OR BASIC FEE	750.00
X\$ 9=	—	OR X\$18=	—
X42=	—	OR X84=	—
+140=	—	OR +280=	—
TOTAL	375	OR TOTAL	—

OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=	—	OR X\$18=	—
X42=	\$43	OR X84=	—
+140=	—	OR +280=	—
TOTAL ADDIT. FEE	pd.	TOTAL ADDIT. FEE	—

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	** 20	= 2
Independent	5	Minus	*** 2	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=	—	OR X\$18=	50
X42=	—	OR X84=	100.00
+140=	—	OR +280=	—
TOTAL ADDIT. FEE	—	TOTAL ADDIT. FEE	—

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=	—	OR X\$18=	—
X42=	—	OR X84=	—
+140=	—	OR +280=	—
TOTAL ADDIT. FEE	—	TOTAL ADDIT. FEE	—

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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